



Report Reference Number: E/18/13

To: Executive
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Ward(s) Affected: All
Author(s): June Rothwell, Head of Operational Services
Drew Fussey, Service Manager
Lead Executive Member: Cllr Pearson, Lead Executive Member for Housing,
Health and Culture
Lead Officer: Julie Slatter, Director Corporate Services and
Commissioning

Title: Review of the Lifeline Service

Summary:

A review of the Lifeline Service has been essential following the loss of Supporting People funding and the re-commissioning of Telecare (Assistive Technology) Services by North Yorkshire County Council (NYCC).

The review has identified that without change, the service is not sustainable. Over a period of 3 years NYCC has means-tested existing and new customers receiving the service reducing the number of supported customers. NYCC funding ended on March 31st 2018, and the SLA with NYCC for the provision of a Telecare service also ended due to the recommissioning of the service and award to a new contractor. The impact from the loss of the NYCC income is £111k, £92k Supporting People and £19k Telecare.

The review found that for the number of customers the service is overstaffed and not meeting customers' needs as it currently offers no Out-Of-Hours (OOH) service. The review, undertaken by officers, explored a range of options and recommends that the Executive support the proposed reconfigured service that meets customer needs and expectations (Option C).

The proposed service is expected to cover its direct costs and make a contribution to corporate overheads but the contribution will be less than the current budget and consequently savings will be required to cover this.

Recommendations:

1. To note the projected budget shortfall of £88k in 2018/19 following the end of Supporting People funding and the Telecare contract which will be managed within the overall General Fund budget through in-year savings and/or use of contingency.
2. Support the trial of the reconfigured serviced (Option C)

Reasons for recommendation(s)

To ensure the Council continues to provide a vital service that is an integral part of delivering the Corporate plan. It will enable the Council to play a key role in supporting better outcomes for individuals, help reduce isolation and help manage demand across the wider health and social care system, supporting more people to remain independent in their own home.

1. Introduction and background

- 1.1 The Council's Lifeline Service is a support service that enables older, disabled and vulnerable people to remain living independently in their own homes for longer. It provides customers with alarm pendants, call centre monitoring, and a daytime mobile emergency response service. In addition, some customers receive regular home visits, reducing isolation and loneliness. The service is a discretionary service and not a statutory requirement for the Council.
- 1.2 The service has been operating for around 15 years having developed from the warden service for sheltered accommodation council tenants. The team consists of 11.93 Full Time Equivalents (FTE) staff, including a Supervisor, a Telecare Officer and 9.93 Support Officers. It is a well-established team, with an extensive bank of experience and local knowledge.
- 1.3 The service supports priorities 2 and 3 of the Corporate Plan, making Selby a great place to enjoy life, and make a difference.
- 1.4 Following the withdrawal of Supporting People funding by NYCC and the Assistive Technology contract the service will lose £111k of income. The service in its current structure is unsustainable triggering this essential review. Any growth in private payers combined with the proposed redesigning of the service will contribute towards mitigating this position.

2. What is the Lifeline Service

- 2.1 Lifeline is a call alarm support service to enable people to live independently, offering the peace of mind to them and their relatives that assistance is on hand when needed.

- 2.2 There are currently 4 levels of support available; Friends & Family, Reassurance, Level 1 & 2 support plan visits.
- 2.3 As of 1st April 2018 the service supported 840 residents in the district; 736 private paying customers and 104 Supporting People (SP) funded customers.

3.0 The ending of North Yorkshire Contract and Supporting People (SP) and procurement of NYCC Assistive Technology Contract

- 3.1 In 2017, following public consultation NYCC took the decision to withdraw SP funding from April 2018. At the same time NYCC also tendered for a new Assistive Technology Service (including lifeline and telecare). Officers of the Council worked with other existing North Yorkshire Local Authority and social housing providers of lifeline and telecare in partnership with Tunstall Ltd but the collaborative bid was unsuccessful.
- 3.2 The NYCC SP contract has been an ongoing arrangement since 2003 and has set the standard and charges for the entire service. It requires lengthy administration support plans for each customer, adhering to a quality assurance framework (QAF), and Support Officers making monthly or weekly visits to customers.
- 3.3 Previously, customers could receive full or part funding support from NYCC if they passed a financial and need assessment, as determined by NYCC. Selby District Council were commissioned by NYCC, via SP funding, to provide the service to those funded customers on Level 1 and Level 2 packages.
- 3.4 In 2014 NYCC had 497 supported customers. NYCC revised the criteria for support to the customer and a new need and financial assessment was introduced in 2014 leading to a reduction in SP customers to 187 by 2017
- 3.5 The fee paid by NYCC to Selby for the provision of the service has been fixed for the last 5 years, with no inflationary rise. This has contributed to the provision of the service running at a loss to the Council.
- 3.6 The private payer element of the Lifeline service for Level 1 and Level 2 customers mirrored the NYCC contract pricing, administration, and QAF requirements. This has restricted the development of the service.
- 3.7 In April 2017, NYCC ceased the provision of the Care Team which had provided the OOH's response in Selby. This left customers with call monitoring response or friends and family only out of normal working hours.
- 3.8 NYCC gave notice that due to the loss of SP funding the contract with SDC would end on 31st March 2018. NYCC have notified those customers receiving support that their funding will be reviewed and will only be continued

if the customer has a care element. Customers who are eligible for NYCC support will transfer to the new Assistive Technology contract.

- 3.9 Any new referrals for NYCC funded Telecare and Lifeline will be referred by NYCC to their new service provider appointed to deliver the Assistive Technology contract. The Lifeline service will then have to generate its own income by marketing to secure new customers.
- 3.10 The Lifeline team are continuing to receive referrals from the NHS, primarily York teaching hospital. In the first quarter of 2018/19 35 referrals have been received without any marketing or promotion. With targeted promotion, via GP surgeries, pharmacies and voluntary and community groups who support the elderly, disabled and vulnerable, the new service and products offered (developed through market research) should enable the required growth to ensure the service achieves full cost recovery within 18 months.

4.0 Current Service Provision and Staff Structure

- 4.1 The current structure for the Lifeline Service has 11.93 Full Time Equivalents (FTE). The service is currently operating with 1 Supervisor, 1 Telecare Officer and 9.93 Support Officers. The service has two vacant posts.

5.0 Alternative Options Considered

The Officers review identified the following possible options for consideration (A to D):

- 5.1 **Option A - Continue as is, no action** – The existing service is losing money. The projection for 2018/19, on a full cost recovery basis, anticipates a shortfall of £89k. Given the loss of NYCC funding (£105k budgeted for 2018/19) is only partially mitigated by vacancy savings and a one-off £20k contribution from NYCC, and still has the requirement to meet the costs of corporate overheads.
 - 5.1.1 The NYCC contract specified how the service was provided. A survey of current customers and feedback from customers carried out in February 2018 and feedback from new customers seeking the service identified that the current service model was outdated and no longer reflects customer need. Following the ceasing of the NYCC Care Team in 2017, there is no OOH service provision, and the service would be overstaffed based on the number of customers. The loss of NYCC funding entails a potential reduction of around 104 customers as well as associated SP and Telecare income, if no action is taken to retain these customers. It would also result in a loss of referrals from NYCC. A new competitor (NYCC's preferred supplier NRS Healthcare) would be operating locally.
- 5.2 **Option B - Discontinue service or transfer to 3rd party** - This option would eliminate financial loss and risk to SDC. A third party provider would be

expected to take on the staff under TUPE and customers could still receive a service.

- 5.2.1 If the service is discontinued without transfer to a third party staff would be at risk of redundancy, with a likelihood of one-off redundancy costs (£38k approx.) and dependent upon age pension strain payments, these costs have yet to be established. In addition current overheads for support services £94k for 2018/19 would not be saved and would be required to be allocated to other services as indirect saving opportunities would not be realised, in addition depreciation charges for the equipment would still be incurred until the point of disposal.
- 5.2.2 Transfer to a third party would still support independent living, but might not support vulnerable people, or reduce isolation in the same way as the existing service due to the loss of the companion visits.
- 5.2.3 In either case customers' choices would be limited, and the high levels of trust customers place on the Council's service would probably decline.
- 5.3 **Option C - SDC provides a reviewed reconfigure service, including OOH, residential support, co-ordinating Disabled Facilities Grants and Aids and Adaptations, providing optional support visits and offering more products –**
This option fully supports the Corporate Plan aims (independent living, and supporting vulnerable people). Within the marketplace, SDC would have a unique offer of support, retaining the 'companion' support officer visits if required by the customer on a 'Pay-to-Play' pricing model ensuring full cost recovery. Seven posts would be protected. The customer base would be more likely to grow as the market research carried out in January 2018 suggests customers want and are willing to pay for the companion visits.
- 5.3.1 If customer numbers are not sustained, there is some risk of overstaffing and this option requires an increased cost for OOH of around £18,000 p.a. This option also necessitates a complete change of staff contracts and a new product offer including new fees which is shown below (8.2.16). There would be redundancy costs of up to £12,000 and potential pension strain costs which are yet to be established.
- 5.4 **Option D – The "Ryecare" model –** SDC provides installation, no support visits, and all emergency response provided by a 3rd party - This option has a low staff cost and low financial risk. It provides what the customer needs. The service would just be another provider in the marketplace. At this time the financial appraisal of this option has not been pursued, no potential 3rd party providers have been identified that would enable Officers to develop this option. Although it supports independent living it does not offer the companion support for vulnerable customers. Given external provision, the capacity for connecting to other support and prevention services will be difficult to influence. This option has no USP, offering the same level of service as other providers. Again, this option would result in staff

redundancies of at least 5 staff. Redundancy costs would be approximately £30k with a potential for pension strain costs.

- 5.5 A risk assessment for each proposed option has been undertaken. Option C is the most likely to remove and mitigate the risks that will be proactively managed.

6.0 **Analysis**

- 6.1 Given the presenting factors it is felt the only realistic option is C. The Lifeline service, although not a statutory service, is an integral part of delivering the Corporate Plan. The reconfigured service will enable the Council to play a key role in supporting better outcomes for individuals and help manage demand across the wider health and social care system, and enable more people to remain independent in their own home.
- 6.2 By implementing Option C the issue of overstaffing would be significantly reduced, customer service improved, and the shortfall arising from the loss of NYCC income addressed.
- 6.3 It is recommended that this option is trialled for 18 months, in order to allow time for customers to adjust to the new product, and for proof of concept.
- 6.4 Whilst Option C is initially more costly than some other options, it enables continuing support of SDC's Corporate priorities. By enabling people to remain independent in their homes, the Lifeline Service supports priorities 2 and 3 of the Corporate Plan, making Selby a great place to enjoy life, and make a difference. The work of the service also supports the work of various partner agencies, including the NHS and NYCC.
- 6.5 Option C offers a USP of additional optional support, and a flexible offer for the benefit of the customer. It would also enable the Lifeline Service to meet customer need (via OOH emergency response) in order to be able to grow the service in future.
- 6.6 The current Lifeline Service does not currently offer an OOH emergency mobile response. Historically, this aspect of the service was provided by NYCC. However, in March 2017 NYCC ceased to provide OOH response at short notice. As a result, outside of normal working hours, the Lifeline Service offers call centre monitoring only. This means that the existing product does not meet customers' needs, and is not comparable with other providers in the marketplace. Nor does it allow the service to contribute to reducing the pressure/demand on blue light services including ambulance and police that the call monitoring centre have to call upon to respond to falls etc. OOHs. The Lifeline team are trained to deal with falls and already have the necessary equipment to help life people off the floor. But currently can only respond during the working day.

- 6.7 In addition, the opportunity to merge delivery of the Disabled Facilities Grant (DFG) with the Community Support Team has been agreed. This has created additional efficiencies for DFG provision, utilising any spare capacity within the Support Officer team during the standard working day. Linking DFG with Lifeline provision provides another practical way for the Council to deliver on Corporate priorities, and provides great value for money.
- 6.8 Furthermore, any referrals from Social Workers or Occupational Therapists for DFG provide additional opportunities to work with NYCC to provide support and assistance to vulnerable customers, for example, the Support Officer will be able to promote the availability of both the Lifeline Service and DFG's, which could increase the uptake of both.

7.0 Proposed Team Structure

- 7.1 The revised Lifeline service team would deliver:
- Lifeline services (installation, monitoring, call monitoring and responding to activations)
 - Residential support for the Council's sheltered housing
 - Out-of-Hours response (24/7)
 - Co-ordination of delivery of the DFG
 - Additional companion services to meet the needs of customers.
- 7.2 Option C proposes a staff team of 8 FTE; 4 support officers, 2 Residential Officers (funded via HRA and private fee income), 1 DFG Coordinator (funded by DFG) and a Supervisor, a reduction of 3.93 FTE.

8.0 Implications

8.1 Legal Implications

There are no direct legal implications.

8.2 Financial Implications

- 8.2.1 NYCC income will cease during the 2018/19 financial year. This represents a combined loss of £111k (£92k SP and £19k Telecare funding). As part of agreed transitions, NYCC have provided £20k (Telecare until June 2018 and SP funding to Sept 2018). This has been included in the latest 2018/19 projection in the table above.
- 8.2.2 In 2017/18 private customer income was £212k. Latest forecasts suggest this could achieve up to £234k although at this early stage in the year there is clearly some risk to that. Option C assumes growth in private payers of £32k and table 1 below demonstrates the impact with and without growth (with the latter based on the 2017/18 level plus inflation).

8.2.3 All proposals include receiving a contribution from the HRA £65k. This contribution covers the residential wardens at Laurie Backhouse Court and St Wilfrid's, and management of the 10 housing community centres.

8.2.4 The following table summarises the financial implications of the options under consideration compared to the current approved budget. Whilst all of the options considered would see an overall increase in net 'cost' to the Council, even with no assumed income growth, Option C is the most favourable option.

Table 1

	2018/19 Budget £ 000's	2018/19 Estimated Outturn £ 000's	Option A – Do Nothing £ 000's	Option B – Disconti nue Service £ 000's	Option C with Income Growth £ 000's	Option C No Income Growth £ 000's
Total Income	(432)	(319)	(299)	0	(357)	(308)
Total Direct Costs	311	286	315	0	270	270
Contribution to corporate overheads	(121)	(33)	16	0	(87)	(38)
Overall net 'cost' compared to current approved budget		88	136	121	33	83
Support Services (CEC) Recharges	94	94	94		63	63
Other Corporate Costs (Dep'n)	28	28	28		28	28
Net Cost of Service	1	89	138		3	53
% Full Cost Recovery	100%	78%	68%		100%	85%
Transition costs				38	12	12

Option A – Do nothing

8.2.5 Table 1 demonstrates that doing nothing 'option A' is not a model for sustainability and has a detrimental impact on Council finances. Retaining the current service structure and assuming no income growth would result in a gross loss of £16k which would require an increase of £136k in the annual budget for this service. After allocating overheads and depreciation the net cost of the service increases to £138k.

Option B – Discontinue Service

8.2.6 Discontinuing the service would remove the direct net cost of the service but would also lose any potential contribution to the Council's corporate overheads and therefore this option is not recommended. Compared to our current budget this option would increase the Council's overall budget by £121k.

Option C

- 8.2.7 Option C has been modelled on a customer base of 820 and reflects a new pricing structure. The service currently has 840 customers of which 104 are Supporting People funded. Based on the offer of the new service and fees, the expectation is that 80% of these SP funded customers will be retained (based on retention rates achieved during the last 3 years) when NYCC funding ends.
- 8.2.8 This option has been calculated on the basis of 6 support officers grade 1b (two being residential wardens), one DFG Coordinator grade 2a, and one supervisor grade 3b within the team. To achieve this structure, redundancies £12k and potential one-off pension strain costs will be likely.
- 8.2.9 The DFG Coordinator post will be funded from the administration charge which can be applied to DFG.
- 8.2.10 The option C projection has been calculated on the basis of the cost of OOH callouts being included in the annual fee. This gives the worst-case scenario in terms of full cost recovery, whilst ensuring that vulnerable customers are not discouraged from requesting the service because of fears regarding cost. A charge will be made for callouts on a unit basis in instances where it is not an emergency.
- 8.2.11 For the purposes of charging the financial implications have been modelled on the assumption that CECs recharged to the service would be revised in future years on a per capita basis, as the staff team reduces. However, as highlighted previously, these are fixed overhead costs and as such will need to be allocated to alternative services. Therefore, whilst Option C aims for full cost recovery there will still be a £33k increase in the overall net cost to the Council which will require the approval of a permanent budget increase as part of the 2019/20 budget (subject to the outcome of the trial). It should also be noted that without the planned growth in the client base and income, the increase in overall net cost would be £83k p.a.
- 8.2.12 The option C budget has been calculated on the basis of one full year, under the new arrangements. Restructuring the team and revising charging levels will take time, hence the recommendation for an 18-month trial basis.
- 8.2.13 All the proposed changes to the service will not be in place until April 2019 and therefore the projected outturn for the service in 2018/19 shows a net cost of £89k against a net budget of £1k – an increase of £88k. This will be included in the overall in-year projections and managed within the Council's existing General Fund budget.
- 8.2.14 A full business case has been prepared to develop the new fees and charges. This is based on the Council's Corporate Charging Policy and aims to achieve full cost recovery by reducing the cost of the service and growing the client base.

8.2.15 The service can achieve full cost recovery on a sustained customer base minimum of 951 (an additional 131 customers). As explained in 5.3 Option C, the flexibility of the pay-for-play model is seen as attractive to customers and easy to understand so the expectation is any initial loss of SP funded customers will be recovered as the new service is promoted by the combined DFG and Lifeline support team. Performance of the team will be monitored closely and reviewed quarterly. It should be noted that without this growth in client base to meet full cost recovery would lead to a shortfall of income and only 85% of total cost being fully recovered.

8.2.16 If additional support visits are optional, there is a risk of customers choosing not to receive these visits. Our projections are based on a conservative assumption that just 25% of customers will continue to receive regular visits. Furthermore, income from support visits represents just 14% of total income projected. Therefore if actual volumes vary from projections, the impact on the financial picture for the service will be negligible. The reconfigured team will have capacity for growth if the additional companion visits prove popular. If growth exceeds expectations the full cost recover model enables the service to recruit to meet demand subject to approval of a business case at that time.

8.3 Policy and Risk Implications

8.3.1 Charging proposals (Appendix B) have been benchmarked to ensure the rates are competitive and comparable with other providers. The proposed levels of support available and fees are comparable with the current Friends and Family and Lifeline Plus compares favourably with Level 1. Most customers will see little change in the charges and will benefit from the introduction of OOH.

8.3.2 The product offered is higher quality than the current private sector offer but with comparable prices. In April and May the service received 35 new referrals, should this continue and the referrals sign up to the new service, new customers could be as high as 210 per year.

8.4 Corporate Plan Implications

8.4.1 The Lifeline service is not a statutory function. However, the service is a significant contributor to the Corporate plan, particularly priorities 2 and 3 of the Corporate plan, making Selby a great place to enjoy life, and make a difference. Option C would enable the service to also deliver great value for the Council.

8.5 Resource Implications

8.5.1 The review will be undertaken in accordance with the 'Protocol for the Management of Organisational Change and Redundancy Policy'. Initially voluntary redundancy will not be offered.

8.5.2 Supporting Option C would result in a reduction of staff (3.93 FTE). The contracts of all affected staff would be at risk for the purposes of redundancy.

The Council will undertake the review in accordance with the 'Protocol for the Management of Organisational Change and Redundancy Policy.

- 8.5.3 Should the service be discontinued (Options B) the Council will incur redundancy costs (£37,847) and a potential pension strain.

8.6 Other Implications

- 8.6.1 Ceasing this non statutory service may have reputational implications as it's seen by customers as essential, a genuine 'lifeline' giving them the confidence to continue to live in their own home. Customers, and the wider public have reacted negatively where such a service that supports the vulnerable, disabled and elderly to live independently have been withdrawn.

8.7 Equalities Impact Assessment

Equality, Diversity, and Community Screenings have been carried out for the Fees and charges business case that indicate no significant impact.

Screening has been completed for all options. Based on continuation of a service in some form the impact is minimum to moderate.

If the service is discontinued a full assessment would be required including consultation with affected groups.

9. Conclusion

- 9.1 Supporting Option C will ensure the Council continues to provide a vital service that is an integral part of delivering the Corporate plan. It will enable the Council to play a key role in supporting better outcomes for individuals, help reduce isolation and help manage demand across the wider health and social care system, supporting more people to remain independent in their own home.

10. Background Documents

Lifeline Annual Report 2017
Equality, Diversity, and Community Screening documents

11. Appendices

Appendix A Financial implications breakdown
Appendix B – Lifeline Service Charges, Current and Proposed

Contact Officer:

June Rothwell
Head of Operational Services
jrothwell@Selby.gov.uk
01757 292103

Appendix A - Financial Implications breakdown

Account description	2018/19 Budget	Estimated 2018/19 Outturn	Option A - Do nothing	Option B - Discontinue Service	Option C - with income growth	Option C - no income growth	Comments
Income							
OTHER GOVERNMENT GRANTS	-92,000.00	-20,000.00					NYCC Sporting People funding
NYCC TELECARE FUNDING	-13,000.00						NYCC Telecare
PRIVATE PAYERS SERVICE FEE	-262,020.00	-234,000.00	-234,000.00		-265,940.00	-216,240.00	Option C - Includes growth estimate of 130 Customers generating £32k. The no growth Option C scenario assumes income at 2017/18 level plus inflation
OTHER CEC RECHARGE - Charge to HRA	-65,080.00	-65,080.00	-65,080.00		-65,080.00	-65,080.00	Mgmt of Community Centres - to review annual inflation & calculation
OTHER CEC RECHARGE - Charge to DFCS					-26,460.00	-26,460.00	DFG Coordinator
Total Income	-432,100.00	-319,080.00	-299,080.00	0.00	-357,480.00	-307,780.00	
Direct Costs							
GROSS PAY	210,360.00	189,250.00	210,360.00		155,640.00	155,640.00	Includes DFG Coordinator
NATIONAL INSURANCE EMPLOYERS	13,450.00	12,500.00	13,450.00		12,190.00	12,190.00	
SUPERANNUATION EMPLOYERS	35,350.00	31,500.00	35,350.00		25,970.00	25,970.00	
STANDBY PAYMENTS					18,700.00	18,700.00	New Out of Hours / Standby payments
APPRENTICESHIP LEVY		920.00			920.00	920.00	Likely to reduce based on final team structure
CAR ALLOWANCES	23,000.00	18,500.00	23,000.00		22,460.00	22,460.00	Reflects smaller team but more mileage
CLOTHING & UNIFORMS	1,600.00	1,600.00	1,600.00		1,260.00	1,260.00	Reduced staff level
PRIVATE CONTRACTORS - CONTRACT	25,480.00	27,400.00	25,480.00		28,500.00	28,500.00	
TELEPHONES - OFFICE	200.00	200.00	200.00		290.00	290.00	
TELEPHONES - MOBILE	1,850.00	1,500.00	1,850.00		1,760.00	1,760.00	Reduced staff level
SUBSCRIPTIONS	1,230.00	1,230.00	1,230.00		1,230.00	1,230.00	Telecare Service Association - new subscription in 17/18
GENERAL INSURANCES	1,230.00	1,230.00	1,230.00		1,230.00	1,230.00	Insurance Allocation - First incurred 17/18 - Should be included
Total Direct Costs	311,290.00	285,830.00	314,670.00	0.00	270,150.00	270,150.00	
Net Position - Direct Costs & Income = Contribution to corporate overheads	-120,810.00	-33,250.00	15,590.00	0.00	-87,330.00	-37,630.00	
Overall Net cost to Council compared to current budget		87,560.00	136,400.00	120,810.00	33,480.00	83,180.00	Contribution is the amount available after direct income/costs to court towards corporate fixed overheads
Support Services (Indirect Costs)							
FINANCE CEC	5,340.00	5,340.00	5,340.00	5,340.00	3,560.00	3,560.00	Support service charges are shown reduced for option C but in reality these will be redistributed to other services and will not be a saved
CUSTOMER CONTRACT CENTRE CEC	7,980.00	7,980.00	7,980.00	7,980.00	5,320.00	5,320.00	
HUMAN RESOURCES CEC	16,380.00	16,380.00	16,380.00	16,380.00	10,920.00	10,920.00	
COMPUTERS CEC	19,390.00	19,390.00	19,390.00	19,390.00	12,930.00	12,930.00	
OPERATIONAL MANAGEMENT TEAM CEC	23,720.00	23,720.00	23,720.00	23,720.00	15,810.00	15,810.00	
HOUSING SUPPORT & ENFORCEMENT CEC	20,990.00	20,990.00	20,990.00	20,990.00	13,990.00	13,990.00	
Total Indirect Costs	93,800.00	93,800.00	93,800.00	93,800.00	62,530.00	62,530.00	
Net Position - after indirect costs	-27,010.00	60,550.00	109,390.00	93,800.00	-24,800.00	24,900.00	
Accounting Adjustments							
DEPRECIATION	28,180.00	28,180.00	28,180.00	28,180.00	28,180.00	28,180.00	Notional corporate cost - depreciation of equipment
Total Accounting Adjustments	28,180.00	28,180.00	28,180.00	28,180.00	28,180.00	28,180.00	
Net Cost of Service	-1,170.00	88,730.00	137,570.00	121,980.00	3,380.00	53,080.00	
Percentage - Full Cost Recovery	99.73%	78.24%	68.49%	0.00%	99.05%	85.29%	

Appendix B – Lifeline Service Charges, Current and Proposed

Currently levels of support:

Current Service levels	Price per week	Service description
Friends and Family	£4.50	Call monitoring - No support service visits
Reassurance	£5.55	Call monitoring and biannual support plan visits
Level 1	£6.65	Call monitoring and monthly support plan visits
Level 2	£13.30	Call monitoring and weekly support plan visits
Standalone	N/A	Installation only

The New charges (products) under option C: are for the revised service:

Proposed service levels	Price per week	Service description
Lifeline	£4.80	call monitoring, Friends and Family and emergency response
Lifeline Plus Monthly	£9.65	As above with monthly companion visits
Lifeline Plus Quarterly	£6.40	As above with a Quarterly companion visits
Additional services, charged per call		
30 min companion visit	£22.00	Short companion visit providing reassurance and support for customer
1 hour companion visit	£32.00	longer companion visit providing reassurance and support for customer
Out of Hour call out	£42.00	non-emergency – customer insists on none urgent attendance by support officer